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Fill in this in	nformation to identify	your case and this fil	ing:		
Debtor 1	Geri	Lynn	LaPorte		
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if fil	ing) First Name	Middle Name	Last Name		
United Stat	es Bankruptcy Court for	the: Easter	n District of Pennsylvania	<u>a</u>	
Case numb	er 24-11996			[Check if this is an
					amended filing
Official I	Form 106A/B				
	lule A/B: Pi	conerty			12/15
		<u> </u>	. 124		
			s. List an asset only once. If an ass nplete and accurate as possible. If t		
equally resp	ponsible for supplyi	ng correct informat	ion. If more space is needed, attach	n a separate sheet to this for	_
additional p	oages, write your na _	me and case number	er (if known). Answer every questio	n.	
Part 1:	Describe Each	Residence, Build	ding, Land, or Other Real Estat	e You Own or Have an Ir	nterest In
1. Do y	you own or have any l	egal or equitable inter	est in any residence, building, land, or s	similar property?	
$\mathbf{\Delta}$	No. Go to Part 2.				
	Yes. Where is the prope	erty?			
2. Add	the dollar value of the	e portion you own for	all of your entries from Part 1, including	any entries for pages	. 1
			here		\$0.00
	•			-	_
Part 2:	Describe Your	Vehicles			
Do you own	ı, lease, or have legal o	or equitable interest in	any vehicles, whether they are register	red or not? Include any vehicles	
you own that	t someone else drives. I	f you lease a vehicle, al	so report it on Schedule G: Executory Cor	ntracts and Unexpired Leases.	
3. Cars,	vans, trucks, tractors,	sport utility vehicles,	motorcycles		
☐ No					
√ Ye	es				
3.1		Lincoln Who ha	as an interest in the property? Check one		
0.1	Make:	<u></u> Del	otor 1 only	Do not deduct secured claim the amount of any secured of	•
	Model:		otor 2 only otor 1 and Debtor 2 only	Creditors Who Have Claims	S Secured by Property.
	Year:	~~~~	east one of the debtors and another		Current value of the portion you own?
	Approximate mileage:	186000	eck if this is community property (see	\$474.00	\$474.00
	Other information:	inst	tructions)		
4 144 .	andt airt	amaa ATM 1 11	annuational vehicles and the contraction	d	
	•	•	recreational vehicles, other vehicles, a t, fishing vessels, snowmobiles, motorcycle		
☑ No		, ,	, , , , , , , , , , , , , , , , , , , ,		
☐ Ye	s				

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5.		ne portion you own for all of your entries from Part 2, including any entries for pages art 2. Write that number here	\$474.00
Pa	rt 3: Describe You	r Personal and Household Items	
Do y	ou own or have any legal or	equitable interest in any of the following items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
6.	Household goods and furr Examples: Major appliance	nishings s, furniture, linens, china, kitchenware	
	☐ No		
	✓ Yes. Describe	Various used pieces of furniture, furnishings, appliances, linens, and other similar items.	\$950.00
7.		radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music tronic devices including cell phones, cameras, media players, games	'
	☐ No ☑ Yes. Describe	Various used televisions, mobile devices, and computers.	\$350.00
8.		jurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or ollections; other collections, memorabilia, collectibles	
9.	kayaks; carpent	hobbies aphic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and ry tools; musical instruments	
	✓ No ☐ Yes. Describe		
10.	Firearms Examples: Pistols, rifles, sh	notguns, ammunition, and related equipment	
44	Yes. Describe		
11.	Clothes Examples: Everyday clothe	s, furs, leather coats, designer wear, shoes, accessories	
	☐ No ☑ Yes. Describe	Various used articles of clothing, shoes, and accessories.	\$250.00

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12.	Jewelry			
	Examples: Everyday jewel silver	ry, costume jewelry, engage	ement rings, wedding rings, heirloom jewelry, watches, gems, gold,	
	☐ No ☑ Yes. Describe			
	• 163. Describe:	Various used pieces of	of jewelry.	\$75.00
13.	Non-farm animals			
	Examples: Dogs, cats, bird	ls, horses		
	☑ No			
	Yes. Describe			
14.	Any other personal and he	ousehold items you did no	ot already list, including any health aids you did not list	
	☑ No			
	Yes. Give specific			
	information			
15.	Add the dollar value of all	of your entries from Part	3, including any entries for pages you have attached	\$4.005.00
	for Part 3. Write that numb	per here	→	\$1,625.00
Pa	art 4: Describe You	ır Financial Assets		
Do y	ou own or have any legal o	r equitable interest in any	of the following?	Current value of the portion you own?
				Do not deduct secured claims or exemptions.
16.	Cash			
	Examples: Money you hav	e in your wallet, in your hon	ne, in a safe deposit box, and on hand when you file your petition	
	☑ No			
	☐ Yes		Cash:	
17.	Deposits of money			
	•	ngs, or other financial accou	ints; certificates of deposit; shares in credit unions, brokerage houses,	
	and other simila	ar institutions. If you have m	ultiple accounts with the same institution, list each.	
	□ No			
	√ Yes		Institution name:	
	17	.1. Checking account:	Wells Fargo	\$260.00
18.	Bonds, mutual funds, or p	ublicly traded stocks		
10.	· · · · · ·	•	terage firms, money market accounts	
	√ No		•	
	☐ Yes			
19.			ated and unincorporated businesses, including an interest in an	
	LLC, partnership, and join	t venture		
	√ No			
	☐ Yes. Give specific information about them			

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20.	Government and corpo	orate bonds and other	negotiable and non-negotiable instruments	
	•	•	s, cashiers' checks, promissory notes, and money orders. ot transfer to someone by signing or delivering them.	
	√ No			
	Yes. Give specific information about them			
21.	Retirement or pension	accounts		
	Examples: Interests in I	RA, ERISA, Keogh, 40	1(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans	
	☐ No			
	Yes. List each account separately.	Type of account:	Institution name:	
		401(k) or similar plan:	Principal 403(b)(7) Custodial Retirement Plan	\$7,273.55
22.	Security deposits and p	prepayments		
	Your share of all unused	deposits you have mad	de so that you may continue service or use from a company	
	Examples: Agreements others	with landlords, prepaid	rent, public utilities (electric, gas, water), telecommunications companies, or	
	√ No			
	☐ Yes			
23.	Annuities (A contract for	r a periodic payment of	money to you, either for life or for a number of years)	
	√ No			
	☐ Yes			
24.			in a qualified ABLE program, or under a qualified state tuition program.	
	26 U.S.C. §§ 530(b)(1), 5	529A(b), and 529(b)(1).		
	√ No			
	☐ Yes			
25.	Trusts, equitable or fut	ure interests in prope	rty (other than anything listed in line 1), and rights or powers exercisable	
	√ No			
	☐ Yes. Give specific information about the	em		
26.	Patents, copyrights, tra	ademarks, trade secre	ets, and other intellectual property	
	Examples: Internet dom	nain names, websites, p	proceeds from royalties and licensing agreements	
	₫ No			
	☐ Yes. Give specific information about the	em		

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27.	Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses	
	☑ No	
	Yes. Give specific information about them	
Mone	ey or property owed to you?	Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax refunds owed to you	
	☑ No	
	Yes. Give specific information about them, including whether you already filed the returns and the tax years	
29.	Family support	
	Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement	
	☑ No	
	Yes. Give specific information	
30.	Other amounts someone owes you	
	Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else	
	☑ No	
	☐ Yes. Give specific information	
31.	Interests in insurance policies	
	Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance	
	☑ No	
	Yes. Name the insurance company of each policy and list its value	
32.	Any interest in property that is due you from someone who has died	
	If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.	
	☑ No	
	☐ Yes. Give specific information	
33.	Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue	
	☑ No	
	☐ Yes. Describe each claim	
34.	Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims	
	☑ No	
	Yes. Describe each claim	

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35.	Any fina	nncial assets you did not already list		
	√ No			
	Yes.	Give specific information		
36.		dollar value of all of your entries from Part 4, includir 4. Write that number here		\$7,533.55
Pa	rt 5:	Describe Any Business-Related Property	You Own or Have an Interest In. List	any real estate in Part 1.
37.	Do you	own or have any legal or equitable interest in any bus	iness-related property?	
	√ No. (Go to Part 6.		
	Yes.	Go to line 38.		
45.		dollar value of all of your entries from Part 5, includir 5. Write that number here		\$0.00
Pa	rt 6:	Describe Any Farm- and Commercial Fis If you own or have an interest in farmland, list		ve an Interest In.
46.	Do you	own or have any legal or equitable interest in any farn	n- or commercial fishing-related property?	
	√ No. 0	Go to Part 7.		
	Yes.	Go to line 47.		
52.		dollar value of all of your entries from Part 6, includir 6. Write that number here		\$0.00
Pa	rt 7:	Describe All Property You Own or Have a	an Interest in That You Did Not List A	bove
53.	Do you	have other property of any kind you did not already lis	st?	
	Example	es: Season tickets, country club membership		
	√ No			
		Give specific mation		
54.	Add the	dollar value of all of your entries from Part 7. Write th	at number here	\$0.00
Pa	rt 8:	List the Totals of Each Part of this Form		
55.	Part 1: 1	Total real estate, line 2		\$0.00
56.	Part 2: 1	Total vehicles, line 5	\$474.00	
57.	Part 3: 1	otal personal and household items, line 15	\$1,625.00	
58.	Part 4: 1	Total financial assets, line 36	\$7,533.55	
59.	Part 5: 1	otal business-related property, line 45	\$0.00	
60.	Part 6: 1	Total farm- and fishing-related property, line 52	\$0.00	

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61.	. Part 7: Total other property not listed, line 54 +		\$0.00			
62.	Total personal property. Add lines 56 through 61	_	\$9,632.55	Copy personal property total	+_	\$9,632.55
63.	Total of all property on Schedule A/B. Add line 55 + line 62.					\$9,632.55

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Fill in this inform	ation to identify your ca	se:		
Debtor 1	Geri	Lynn	LaPorte	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States E	Bankruptcy Court for the	Eastern	District of Pennsylvania	
Case number	24-11996			☐ Check if this is a
(if known)				amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

04/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

F	Part 1:	Identify the Property Yo	u Claim as Exempt						
1.	☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)								
	Brief description of the property and line on <i>Schedule A/B</i> that lists this property		Current value of the portion you own Copy the value from Schedule A/B		ount of the exemption you claim eck only one box for each exemption.	Specific laws that allow exemption			
	Brief description Line from Schedule	2.4	\$474.00	a	\$474.00 100% of fair market value, up to any applicable statutory limit \$0.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(2) 11 U.S.C. § 522(d)(5)			
any applicable statutory limit 3. Are you claiming a homestead exemption of more than \$189,050? (Subject to adjustment on 4/01/25 and every 3 years after that for cases filed on or after the date of adjustment.) ✓ No ☐ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? ☐ No ☐ Yes									

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Debtor 1 Geri Lynn LaPorte Case number (if known) 24-11996

Last Name

Middle Name

First Name

Brief description of the property and line on <i>Schedule A/B</i> that lists this property		Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from	Che	eck only one box for each exemption.	
		Schedule A/B			
Brief description:	Various used pieces of furniture, furnishings, appliances, linens, and other similar items.	\$950.00	Z Í	\$ 950.00	11 U.S.C. § 522(d)(3)
Line from Schedule A/B:	6			100% of fair market value, up to any applicable statutory limit	
Brief description:	Various used televisions, mobile devices, and	\$350.00			
	computers.		\checkmark	\$350.00	11 U.S.C. § 522(d)(3)
Line from Schedule A/B:				100% of fair market value, up to any applicable statutory limit	
Brief description:	Various used articles of clothing, shoes, and	\$250.00			
	accessories.			\$250.00	11 U.S.C. § 522(d)(3)
Line from Schedule A/B:	11			100% of fair market value, up to any applicable statutory limit	
Brief description:	Various used pieces of jewelry.	\$75.00	<u> </u>	¢75.00	44 11 C.C. C. E220(4)(4)
Line from Schedule A/B:				\$75.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(4)
Brief	Wells Fargo	\$260.00			
description:	Checking account			\$260.00	11 U.S.C. § 522(d)(5)
Line from Schedule A/B:	17			100% of fair market value, up to any applicable statutory limit	
Brief description:	Principal 403(b)(7) Custodial	\$7,273.55			
	Retirement Plan		\checkmark	\$7,273.55	11 U.S.C. § 522(d)(12)
Line from Schedule A/B:	21			100% of fair market value, up to any applicable statutory limit	

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Fill in this inform	ation to identify your ca	ase:		
Debtor 1	Geri	Lynn	LaPorte	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States E	Bankruptcy Court for the	e: Eastern	District of Pennsylvania	
Case number (i known)	f 24-11996			Check if this is an amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - Mo. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below.

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			0 00	Do	cument	Pa	ae 11 of	42		2 3 3 3	
Fill in thi	is informa	ation to identify	your case:								
Debtor	1	Geri	Lynn		LaPorte						
		First Name	Middle N	ame	Last Name						
Debtor											
(Spouse	e, if filing)	First Name	Middle N	ame	Last Name						
United	States B	ankruptcy Cou	rt for the:	Eastern	Dis	strict of _	Pennsylva	nia_			
Case n	umber	24-11996									
(if know	n)									amende	this is an d filing
Officia	l Forn	n 106E/F									Ç
Sche	edul	le E/F:	Creditor	s Who	o Have	e Ur	secur	ed Cla	ims		12/15
claims th number t number (nat are li the entri (if know	sted in <i>Sched</i> es in the boxe n).	e G: Executory Coule D: Creditors Notes on the left. Atta	Who Have C ach the Cont	laims Secured tinuation Page	d by Pro	perty. If more	space is ne	eded, copy the F	art you need, f	ill it out,
Part	1: L	ist All of You	ur PRIORITY Ui	nsecured (Claims						
1. Do	any cre	ditors have pr	iority unsecured	claims agai	nst you?						
	No. Go Yes.	to Part 2.									
clai am	m listed, ounts. As	identify what ty s much as poss	nsecured claims. ype of claim it is. If sible, list the claims ge of Part 1. If more	f a claim has s in alphabeti	both priority ar	nd nonportion	riority amounts the creditor's r	s, list that clair name. If you h	n here and show ave more than tw	both priority and	nonpriority
(Fo	r an exp	lanation of eacl	h type of claim, se	e the instruct	tions for this for	rm in the	e instruction bo	ooklet.)			
									Total claim	Priority amount	Nonpriority amount
2.1 In	ternal l	Revenue Ser	vice	Last 4 dig	its of account	numbe	er		\$533.00	\$533.00	\$0.00
Pri	iority Cre	ditor's Name									
С	entraliz	zed Insolven	cy Operation	When was	the debt incu	ırred?					
P	O Box	7346									
	ımber	Street		As of the	date you file, t	the clair	m is: Check al	I that apply.			
		phia, PA 1910	01-7346	☐ Conting	gent						
Cit		State	ZIP Code	Unliqui							
	•			Dispute	ed						
		red the debt?	Check one.	Type of PF	RIORITY unsec	cured c	laim:				
	Debtor Debtor				tic support obli						
		1 and Debtor 2	only		and certain oth	U		government			
			otors and another		for death or pe				ated		
_	Check	if this claim is unity debt		Other.	Specify				-		

✓ No ☐ Yes

Is the claim subject to offset?

Case 24-11996-amc Doc 12 Filed 07/08/24 Entered 07/08/24 13:13:13 Desc Main Page 12 of 42 Document Debtor 1 LaPorte Case number (if known) 24-11996 Lvnn First Name Middle Name Last Name Part 2: List All of Your NONPRIORITY Unsecured Claims Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. **✓** Yes List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2. Total claim **Ann Marie Carter** Last 4 digits of account number \$2,300.00 Nonpriority Creditor's Name When was the debt incurred? 118 Concord Dr Number As of the date you file, the claim is: Check all that apply. Contingent Hereford, PA 18056-1556 Unliquidated ZIP Code State ☐ Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: **☑** Debtor 1 only Student loans ☐ Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as ☐ Debtor 1 and Debtor 2 only priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts ☐ Check if this claim is for a community debt ☑ Other. Specify Money Loaned Is the claim subject to offset? **√** No ☐ Yes 4.2 **Aspire Credit Card** Last 4 digits of account number 2 4 1 \$1,432.00 Nonpriority Creditor's Name When was the debt incurred? 11/1/2022 Attn: Bankruptcy PO Box 105555 As of the date you file, the claim is: Check all that apply. Number Street Contingent Atlanta, GA 30348-5555 ■ Unliquidated ZIP Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim:

✓ No ☐ Yes

✓ Debtor 1 only

☐ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

Is the claim subject to offset?

At least one of the debtors and another

☐ Check if this claim is for a community debt

Student loans

priority claims

☑ Other. Specify CreditCard

Obligations arising out of a separation agreement or divorce that you did not report as

Debts to pension or profit-sharing plans, and other similar debts

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Debtor 1 Geri Lynn LaPorte Case number (if known) 24-11996

Last Name

Middle Name

First Name

Your NONPRIORITY Unsecured Claims - Continuation Page Part 2: After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. Total claim **Capital One** Last 4 digits of account number 2 8 3 8 \$1,502.00 Nonpriority Creditor's Name When was the debt incurred? 6/1/1997 P.O. Box 30285 Number As of the date you file, the claim is: Check all that apply. Contingent Salt Lake City, UT 84130 ■ Unliquidated ZIP Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: **☑** Debtor 1 only ■ Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as ☐ Debtor 1 and Debtor 2 only priority claims ☐ At least one of the debtors and another ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Check if this claim is for a community debt ☑ Other. Specify CreditCard Is the claim subject to offset? **☑** No ☐ Yes 4.4 Capital One Last 4 digits of account number \$477.00 2 1 5 5 Nonpriority Creditor's Name When was the debt incurred? 8/1/2021 Attn: Bankruptcy PO Box 30285 As of the date you file, the claim is: Check all that apply. Number Street Contingent Salt Lake City, UT 84130-0285 Unliquidated City ZIP Code State Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: ☑ Debtor 1 only ■ Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts ☐ Check if this claim is for a community debt ✓ Other. Specify CreditCard Is the claim subject to offset? **☑** No Yes

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Debtor 1 Geri Lynn LaPorte Case number (if known) 24-11996

Last Name

Middle Name

First Name

Pa	rt 2: Your NONPRIORITY Unsecured Claims -	– Continuation Page
Afte	r listing any entries on this page, number them beginnin	ng with 4.4, followed by 4.5, and so forth.
4.5	Chase Card Services	Last 4 digits of account number 7 4 8 4 \$12,989.00
	Nonpriority Creditor's Name	144
	Po Box 15298	When was the debt incurred? 1/1/2024
	Number Street	
		As of the date you file, the claim is: Check all that apply.
	Wilmington DE 40050 5200	☐ Contingent
	Wilmington, DE 19850-5298 City State ZIP Code	- Unliquidated
	City State ZIP Code	☐ Disputed
	Who incurred the debt? Check one.	T. (NONDRIGHTY
	☑ Debtor 1 only	Type of NONPRIORITY unsecured claim:
	☐ Debtor 2 only	☐ Student loans
	☐ Debtor 1 and Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
	☐ At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts
	☐ Check if this claim is for a community debt	☑ Other. Specify CreditCard
	Is the claim subject to offset?	, <u></u>
	☑ No	
	☐ Yes	
	<u> </u>	
4.6	Citizens Bank	Last 4 digits of account number 6 2 0 5 \$784.00
	Nonpriority Creditor's Name	When we the debt in some dO F/4/0000
	Attn: Bankruptcy	When was the debt incurred? 5/1/2023
	One Citizens Dr	•
	Number Street	As of the date you file, the claim is: Check all that apply.
	Providence, RI 02903	☐ Contingent
	City State ZIP Code	- Unliquidated
	,	☐ Disputed
	Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:
	Debtor 1 only	☐ Student loans
	Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as
	Debtor 1 and Debtor 2 only	priority claims
	At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts
	☐ Check if this claim is for a community debt	✓ Other. Specify CreditCard
	Is the claim subject to offset?	
	☑ No	
	☐ Yes	

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Debtor 1 Geri Lynn LaPorte Case number (if known) 24-11996

Last Name

Middle Name

First Name

Pa	rt 2: Your NONPRIORITY Unsecured Claims -	– Continuation Page				
After	listing any entries on this page, number them beginning	ng with 4.4, followed by 4.5, and so forth.				
4.7	Cornerstone	Last 4 digits of account number _ 5 _ 1 _ 7 _ 1 \$5,298.00				
	Nonpriority Creditor's Name					
	Po Box 82561	When was the debt incurred? 8/1/2010				
	Number Street	_				
		As of the date you file, the claim is: Check all that apply.				
	Lincoln, NE 68501	□ Contingent				
	City State ZIP Code	- ☐ Unliquidated				
	,	☐ Disputed				
	Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:				
	Debtor 1 only	☑ Student loans				
	Debtor 2 only	☐ Obligations arising out of a separation agreement or divorce that you did not report as				
	Debtor 1 and Debtor 2 only	priority claims				
	☐ At least one of the debtors and another☐ Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other similar debts				
	Check if this claim is for a community dept	Other. Specify				
	Is the claim subject to offset?					
	☑ No					
	☐ Yes					
4.8	Cornerstone	Last 4 digits of account number 5 2 7 1 \$3,384.00				
	Nonpriority Creditor's Name					
	Po Box 82561	When was the debt incurred? 8/1/2010				
	Number Street	_				
		As of the date you file, the claim is: Check all that apply.				
	Lincoln, NE 68501	☐ Contingent				
	City State ZIP Code	- ☐ Unliquidated				
	,	☐ Disputed				
	Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:				
	Debtor 1 only	✓ Student loans				
	Debtor 2 only	☐ Obligations arising out of a separation agreement or divorce that you did not report as				
	Debtor 1 and Debtor 2 only	priority claims				
	☐ At least one of the debtors and another☐ Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other similar debts				
	Glieck if this claim is for a community debt	Other. Specify				
	Is the claim subject to offset?					
	☑ No					
	☐ Yes					

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Debtor 1 Geri Lynn LaPorte Case number (if known) 24-11996

Last Name

Middle Name

First Name

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. Total claim **Credit One Bank** Last 4 digits of account number 0 7 8 9 \$1,431.00 Nonpriority Creditor's Name When was the debt incurred? 11/1/2013 **Attn: Bankruptcy Department** PO Box 98873 As of the date you file, the claim is: Check all that apply. Number Street Contingent Las Vegas, NV 89193 ■ Unliquidated ZIP Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: ☑ Debtor 1 only Student loans ☐ Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as ☐ Debtor 1 and Debtor 2 only priority claims At least one of the debtors and another ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Check if this claim is for a community debt ☑ Other. Specify CreditCard Is the claim subject to offset? **√** No ☐ Yes 4.10 Credit One Bank Last 4 digits of account number \$969.00 5 4 5 Nonpriority Creditor's Name When was the debt incurred? 8/1/2019 **Attn: Bankruptcy Department** PO Box 98873 As of the date you file, the claim is: Check all that apply. Number Street Contingent Las Vegas, NV 89193 ■ Unliquidated ZIP Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: **☑** Debtor 1 only ■ Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as ☐ Debtor 1 and Debtor 2 only priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts ☐ Check if this claim is for a community debt ☑ Other. Specify CreditCard Is the claim subject to offset? **☑** No ☐ Yes

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_ Case number (if known) 24-11996 Debtor 1 LaPorte Geri Lynn First Name Middle Name Last Name

Pa	Your NONPRIORITY Unsecured Claims -	- Continuation Page
After	listing any entries on this page, number them beginnin	g with 4.4, followed by 4.5, and so forth.
4.11	Jefferson Capital Systems, LLC	Last 4 digits of account number 5 0 0 3 \$1,701.00
	Nonpriority Creditor's Name	
	Attn: Bankruptcy	When was the debt incurred? 2/1/2024
	200 14th Ave E	•
	Number Street	As of the date you file, the claim is: Check all that apply.
	Sartell, MN 56377-4500	☐ Contingent
	City State ZIP Code	- ☐ Unliquidated ☐ Disputed
	Who incurred the debt? Check one. ✓ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? ✓ No □ Yes	Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify FactoringCompanyAccount
4.12	Mariner Finance, LLC Nonpriority Creditor's Name	Last 4 digits of account number 1 8 1 2 \$4,582.00
	Attn: Bankruptcy	When was the debt incurred? 5/1/2023
	8211 Town Center Drive	<u> </u>
	Number Street	As of the date you file, the claim is: Check all that apply.
	Nottingham, MD 21236	☐ Contingent
	City State ZIP Code	 Unliquidated □ Disputed
	Who incurred the debt? Check one. ✓ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt	Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify Unsecured
	Is the claim subject to offset? ☑ No □ Yes	

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Debtor 1 Geri Lynn LaPorte Case number (if known) 24-11996

Last Name

Middle Name

First Name

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. Total claim 4.13 Mohela Last 4 digits of account number \$5,070.00 5 1 7 1 Nonpriority Creditor's Name When was the debt incurred? 8/1/2010 Attn: Bankruptcy 633 Spirit Dr As of the date you file, the claim is: Check all that apply. Number Street Contingent Chesterfield, MO 63005-1243 Unliquidated ZIP Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: ☑ Debtor 1 only ✓ Student loans ☐ Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as ☐ Debtor 1 and Debtor 2 only priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts ☐ Check if this claim is for a community debt Other. Specify Is the claim subject to offset? **√** No ☐ Yes 4.14 Mohela Last 4 digits of account number 5 2 7 1 \$3,287.00 Nonpriority Creditor's Name When was the debt incurred? 8/1/2010 Attn: Bankruptcy 633 Spirit Dr As of the date you file, the claim is: Check all that apply. Number Street ☐ Contingent Chesterfield, MO 63005-1243 Unliquidated ZIP Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: **☑** Debtor 1 only ✓ Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as ☐ Debtor 1 and Debtor 2 only priority claims ■ At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts ☐ Check if this claim is for a community debt Other. Specify Is the claim subject to offset? **☑** No ☐ Yes

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Debtor 1 Geri Lynn LaPorte Case number (if known) 24-11996

Last Name

Middle Name

First Name

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. Total claim 4.15 **One Main Financial** Last 4 digits of account number 2 0 7 6 \$15,164.00 Nonpriority Creditor's Name When was the debt incurred? 1/1/2022 Attn: Bankruptcy PO Box 3251 As of the date you file, the claim is: Check all that apply. Number Street Contingent Evansville, IN 47731 Unliquidated ZIP Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: **☑** Debtor 1 only ☐ Student loans ☐ Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as ☐ Debtor 1 and Debtor 2 only priority claims ■ At least one of the debtors and another ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Check if this claim is for a community debt ☑ Other. Specify Unsecured Is the claim subject to offset? **✓** No ☐ Yes 4.16 OneMain Financial Last 4 digits of account number 2 0 7 6 \$13,195.00 Nonpriority Creditor's Name When was the debt incurred? 1/1/2022 PO Box 3251 Number Street As of the date you file, the claim is: Check all that apply. Contingent Evansville, IN 47731-3251 Unliquidated City State ZIP Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: **☑** Debtor 1 only ☐ Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as Debtor 1 and Debtor 2 only priority claims ■ At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts ☐ Check if this claim is for a community debt ☑ Other. Specify Unsecured Is the claim subject to offset? **☑** No ☐ Yes

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Debtor 1 Geri Lynn LaPorte Case number (if known) 24-11996

Last Name

Middle Name

First Name

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. Total claim 4.17 Upgrade, Inc. \$6,884.00 Last 4 digits of account number 4 7 3 Nonpriority Creditor's Name When was the debt incurred? 2/1/2022 Attn: Bankruptcy 275 Battery Street 23rd Floor As of the date you file, the claim is: Check all that apply. Number Street Contingent San Francisco, CA 94111 Unliquidated ZIP Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: ☑ Debtor 1 only Student loans ☐ Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as ☐ Debtor 1 and Debtor 2 only priority claims At least one of the debtors and another ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Check if this claim is for a community debt ☑ Other. Specify CheckCreditOrLineOfCredit Is the claim subject to offset? **√** No ☐ Yes 4.18 Upgrade, Inc. Last 4 digits of account number 8 2 0 \$3,399.00 Nonpriority Creditor's Name When was the debt incurred? 8/1/2022 Attn: Bankruptcy 275 Battery Street 23rd Floor As of the date you file, the claim is: Check all that apply. Number Street Contingent San Francisco, CA 94111 ■ Unliquidated State ZIP Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only ■ Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as ☐ Debtor 1 and Debtor 2 only priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts ☐ Check if this claim is for a community debt ☑ Other. Specify Unsecured Is the claim subject to offset? **☑** No ☐ Yes

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Case number (if known) 24-11996

\$66,809.00

\$83,848.00

Debtor 1

 Geri
 Lynn
 LaPorte

 First Name
 Middle Name
 Last Name

Other. Add all other nonpriority unsecured claims.

Write that amount here.

Total. Add lines 6f through 6i.

Part 4: Add the Amounts for Each Type of Unsecured Claim Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim. **Total claim Total claims** 6a. **Domestic support obligations** 6a. \$0.00 from Part 1 6b. Taxes and certain other debts you owe the government 6b. \$533.00 Claims for death or personal injury while you were 6c. 6c. \$0.00 intoxicated Other. Add all other priority unsecured claims. 6d. 6d. \$0.00 Write that amount here. Total. Add lines 6a through 6d. 6e. \$533.00 **Total claim Total claims** 6f. Student loans 6f. \$17,039.00 from Part 2 6g. Obligations arising out of a separation agreement or 6g. \$0.00 divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other 6h. 6h. \$0.00 similar debts

6i.

6j.

6i.

6j.

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Fill in this information	to identify your case:			
Debtor 1	Geri	Lynn	LaPorte	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bankr	uptcy Court for the:	Easte	rn District of Pennsylva	nia
Case number (if known)	24-11996	<u> </u>		

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☑ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or o	company with whor	n you ha	ve the contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			
	City		State	ZIP Code	
2.3					
	Name				
	Number	Street			
	City		State	ZIP Code	
2.4					
	Name				
	Number	Street			
	City		State	ZIP Code	

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				Document	Pa	ae 23 of	42	_	
Fill in	this infor	mation to identify y	our case:						
Debt	tor 1	Geri	Lynn	LaPorte					
		First Name	Middle Name	Last Name					
Debt		. ———							
(Spot	use, it tiling	First Name	Middle Name	Last Name					
Unite	ed States	Bankruptcy Court	for the: Easte	ern Dist	rict of	Pennsylva	nia		
		24-11996						Chook if	this is an
(if kn	own)							amended	
Offic	ial For	m 106H							
			ur Codebto	irc					10/15
				_					12/15
filing t	ogether,	both are equally	responsible for supplying	ng correct informa	tion. If	f more space	is needed, o	curate as possible. If two married copy the Additional Page, fill it ou	ut, and number
		ne boxes on the le er every question.		I Page to this pag	e. On t	the top of any	/ Additional	Pages, write your name and case	a number (if
_	D	· ·	C (16 Ellis inio	-t dt ll-t -			-1-1-4>		
1.	√ No	nave any codebto	ors? (If you are filing a joir	nt case, do not list e	eitner s	pouse as a co	debtor.)		
	Yes								
2.	Within t	he last 8 years, h	ave you lived in a comm	unity property sta	ate or t	erritory? (Co	mmunity proj	perty states and territories include A	Arizona,
	California	a, Idaho, Louisiana	a, Nevada, New Mexico, P					,	
		Go to line 3.	former spouse, or legal eq	uuivalant liva with v	ou at th	no timo?			
	☐ N		ionner spouse, or legal eq	divalent live with yo	ou at ti	ic time:			
			nunity state or territory did	l you live?			Fill in the	name and current address of that	person.
			,	, <u> </u>					
	Ī	Name of your spou	use, former spouse, or lega	al equivalent		_			
	-	N. 1							
	ſ	Number	Street						
	(City	State	ZIF	Code	_			
3.	In Colur	nn 1. list all of vo	ur codebtors. Do not inc	clude vour spouse	as a d	odebtor if vo	our spouse is	s filing with you. List the person	shown in line
	2 again	as a codebtor on	ly if that person is a gua	rantor or cosigne	r. Mak	e sure you ha	ve listed the	e creditor on <i>Schedule D</i> (Official ule <i>E/F</i> , or <i>Schedule G</i> to fill out C	l Form 106D),
	Column	1: Your codebtor					Column 2: 1	The creditor to whom you owe the	e debt
							Check all so	chedules that apply:	
3.1									
	Name						☐ Schedul	e D, line	
							☐ Schedul	e E/F, line	
	Number		Street				☐ Schedul	e G, line	

Official Form 106H Schedule H: Codebtors page 1 of 1

ZIP Code

ZIP Code

☐ Schedule D, line _____

☐ Schedule E/F, line _____

☐ Schedule G, line _

City

Name

Number

City

3.2

State

State

Street

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			Document	Page 24 of 42	
Fill in this information	on to identify your cas	se:			
Debtor 1	Geri	Lynn	LaPorte		
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name	_	Check if this is:
United States Bank	kruptcy Court for the	Easte	ern District of P	Pennsylvania	☐ An amended filing ☐ A supplement showing postpetition
Case number (if known)	24-119	96			chapter 13 income as of the following da
					MM / DD / YYYY
Official Forn	n 106I				
Schedule	I: Your Inc	come			12/1

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employment

1.	Fill in your employment information.		Debtor 1					Debtor 2 or no	n-filing sp	ouse
	If you have more than one job, attach a separate page with	Employment status	☑ Employed		ot Employ	yed		Employed No	ot Employe	ed
	information about additional employers.	Occupation	Coordinato	r						
	Include part time, seasonal, or self-employed work.	Employer's name	North Light	Co	nmunity	Center				
	Occupation may include student	Employer's address	175 Green Number Stree				<u> </u>	Number Street		
	or homemaker, if it applies.									
			Philadelphi	a, P				27	0: /	7.0.1
		How long employed there?	City		State	Zip Code	-	City	State	Zip Code
Pa	rt 2: Give Details About Mon	thly Income								
	Estimate monthly income as of the unless you are separated.	e date you file this form. If yo	ou have nothin	g to ı	eport for a	any line, write	\$0 in th	e space. Include y	your non-fi	ling spouse
	If you or your non-filing spouse hav more space, attach a separate she		combine the inf	orma	tion for al	l employers fo	r that pe	erson on the lines	below. If y	ou need
					Fo	or Debtor 1		Debtor 2 or -filing spouse		
2.	List monthly gross wages, salary, deductions.) If not paid monthly, ca	•		2.		3,583.34	_	\$0.00		
3.	Estimate and list monthly overtime	e pay.		3.	+	\$0.00	+_	\$0.00		
4.	Calculate gross income. Add line 2	2 + line 3.		4.		\$3,583.34		\$0.00		

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Debtor 1 Geri Lynn LaPorte Case number (if known) 24-11996

Last Name

First Name

Middle Name

			For Debtor 1	For Debtor 2 or non-filing spouse	
	Copy line 4 here→	4.	\$3,583.34	\$0.00	
5.	List all payroll deductions:				
	5a. Tax, Medicare, and Social Security deductions	5a.	\$740.99	\$0.00	
	5b. Mandatory contributions for retirement plans	5b.	\$0.00	\$0.00	
	5c. Voluntary contributions for retirement plans	5c.	\$180.00	\$0.00	
	5d. Required repayments of retirement fund loans	5d.	\$0.00	\$0.00	
	5e. Insurance	5e.	\$283.99	\$0.00	
	5f. Domestic support obligations	5f.	\$0.00	\$0.00	
	5g. Union dues	5g.	\$0.00	\$0.00	
	5h. Other deductions. Specify:	5h.	+ \$0.00	+ \$0.00	
6.	Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h.	6.	\$1,204.98	\$0.00	
7.	Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$2,378.36	\$0.00	
8.	List all other income regularly received:			· ·	
	8a. Net income from rental property and from operating a business, profession, or farm				
	Attach a statement for each property and business showing gross				
	receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$0.00	\$0.00	
	8b. Interest and dividends	8b.	\$0.00	\$0.00	
	8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive	OD.			
	Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$0.00	\$0.00	
	8d. Unemployment compensation	8d.	\$0.00	\$0.00	
	8e. Social Security	8e.	\$0.00	\$0.00	
	8f. Other government assistance that you regularly receive	00.			
	Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.				
	Specify:	8f.	\$0.00	\$0.00	
	8g. Pension or retirement income	8g.	\$0.00	\$0.00	
	8h. Other monthly income. Specify: Pro-Rata 2023 Federal	8h.	+ \$299.58	+ \$0.00	
	Income Tax Refund				
9.	Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	\$299.58	\$0.00	
10.	Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse	10.	\$2,677.94	+ <u>\$0.00</u> :	\$2,677.94
11.	State all other regular contributions to the expenses that you list in Sched	dule J.			
	Include contributions from an unmarried partner, members of your household friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that a			•	
	Specify:			. 11. +	\$0.00
12.	Add the amount in the last column of line 10 to the amount in line 11. The amount on the Summary of Your Assets and Liabilities and Certain Statistics		•	come. Write that 12.	\$2,677.94
					Combined monthly income
13.	Do you expect an increase or decrease within the year after you file this fo	orm?			
	✓ No. ☐ Yes. Explain:				

Fill in this information	n to identify your case:			
Debtor 1	Geri First Name	Lynn Middle Name	LaPorte Last Name	Check if this is:
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	An amended filing A supplement showing postpetition chapter 13 expenses as of the following date:
United States Bank	ruptcy Court for the:	Easte	rn District of Pennsylvania	MM/DD/YYYY
Case number (if known)	24-11996	<u> </u>		

Official Form 106J

Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1: Describe Your Household	d			
1.	Is this a joint case?				
	No. Go to line 2. Yes. Does Debtor 2 live in a sep No Yes. Debtor 2 must file	parate household? Official Form 106J-2, Expenses for	^r Separate Household of Debtor 2.		
2.	Do you have dependents?	✓No	•		
	Do not list Debtor 1 and Debtor 2.	Yes. Fill out this information for each dependent	Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?
	Do not state the dependents' names.				No. Yes.
					. No. Yes.
					. □No. □Yes.
					. ☐ No. ☐ Yes.
					No. Yes.
3.	Do your expenses include expenses of people other than yourself and your dependents?	☑ No □ _{Yes}			
Pá	art 2: Estimate Your Ongoing N	Monthly Expenses			
			using this form as a supplement in a		
	clude expenses paid for with non-car ch assistance and have included it o			Υοι	ur expenses
4.	The rental or home ownership exp for the ground or lot.	enses for your residence. Include t	first mortgage payments and any rent	4	\$800.00
	If not included in line 4:				
	4a. Real estate taxes			4a	\$0.00
	4b. Property, homeowner's, or rent	er's insurance		4b	\$0.00
	4c. Home maintenance, repair, and	d upkeep expenses		4c	\$0.00
	4d. Homeowner's association or co	ondominium dues		4d	\$0.00

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Debtor 1 Geri Lynn LaPorte Case number (if known) 24-11996

Last Name

First Name

Middle Name

	Yo	our expenses
Additional mortgage payments for your residence, such as home equity loans	5.	\$0.00
Utilities:		
6a. Electricity, heat, natural gas	6a	\$0.00
6b. Water, sewer, garbage collection	6b.	\$0.00
6c. Telephone, cell phone, Internet, satellite, and cable services	6c	\$152.00
6d. Other. Specify:	6d.	\$0.00
Food and housekeeping supplies	7.	\$800.00
Childcare and children's education costs	8	\$0.00
Clothing, laundry, and dry cleaning	9.	\$150.00
Personal care products and services	10.	\$150.00
Medical and dental expenses	11.	\$150.00
Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12.	\$150.00
Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$125.00
Charitable contributions and religious donations	14.	\$0.00
Insurance.		
Do not include insurance deducted from your pay or included in lines 4 or 20.		
15a. Life insurance	15a	\$0.00
15b. Health insurance	15b	\$0.00
15c. Vehicle insurance	15c	\$200.00
15d. Other insurance. Specify:	15d	\$0.00
Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.		
Specify:	16.	\$0.00
Installment or lease payments:		#0.00
17a. Car payments for Vehicle 1	17a	\$0.00
17b. Car payments for Vehicle 2	17b	\$0.00
17c. Other. Specify:	17c	\$0.00
17d. Other. Specify:	17d	\$0.00
Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I).	18.	\$0.00
Other payments you make to support others who do not live with you.		
Specify:	19	\$0.00
Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Inco		¢ ስ ስስ
20a. Mortgages on other property	20a	\$0.00 \$0.00
20b. Real estate taxes		\$0.00
20c. Property, homeowner's, or renter's insurance		\$0.00
20d. Maintenance, repair, and upkeep expenses	20d	\$0.00
20e. Homeowner's association or condominium dues	20e	\$0.00

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Debtor 1 Geri Lynn LaPorte Case number (if known) 24-11996 First Name Middle Name Last Name 21. Other. Specify: 21. \$0.00 22. Calculate your monthly expenses. 22a. \$2,677.00 22a. Add lines 4 through 21. 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22b. \$0.00 22c. Add line 22a and 22b. The result is your monthly expenses. 22c. \$2,677.00 23. Calculate your monthly net income. 23a. \$2,677.94 23a. Copy line 12 (your combined monthly income) from Schedule I. 23b. 23b. Copy your monthly expenses from line 22c above. \$2,677.00 23c. Subtract your monthly expenses from your monthly income. \$0.94 The result is your monthly net income. 23c. 24. Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage? **✓** No. None Yes.

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Fill in this information	n to identify your case:			
Debtor 1	_Geri	Lynn	LaPorte	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bankı	ruptcy Court for the:	Easte	ern District of Pennsylv	ania
Case number (if known)	24-11996	3		

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all

1b. Copy line 62, Total personal property, from Schedule A/B	of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your originate. New <i>Summary</i> and check the box at the top of this page.	al forms, you must fill out a
Value of what you own 1. Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	Part 1: Summarize Your Assets	
1a. Copy line 55, Total real estate, from Schedule A/B		
1b. Copy line 62, Total personal property, from Schedule A/B	1. Schedule A/B: Property (Official Form 106A/B)	**
1c. Copy line 63, Total of all property on Schedule A/B	1a. Copy line 55, Total real estate, from Schedule A/B	\$0.00
Part 2: Summarize Your Liabilities Your liabilities Amount you owe 2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D 3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	1b. Copy line 62, Total personal property, from Schedule A/B	\$9,632.55
Your liabilities Amount you owe 2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D 3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	1c. Copy line 63, Total of all property on Schedule A/B	\$9,632.55
Amount you owe 2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D 3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	Part 2: Summarize Your Liabilities	
2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D 3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F		
3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of <i>Schedule E/F</i>		\$0.00
Your total liabilities \$84,381.0	· · · · · · · · · · · · · · · · · · ·	\$533.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+ \$83,848.00
Part 3: Summarize Your Income and Expenses	Your total liabilities	\$84,381.00
	Part 3: Summarize Your Income and Expenses	
4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I		\$2,677.94
5. Schedule J: Your Expenses (Official Form 106J)	5. Schedule J: Your Expenses (Official Form 106J)	
Copy your monthly expenses from line 22c of Schedule J	Copy your monthly expenses from line 22c of Schedule J	\$2,677.00

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			Document	Page 30 of 42	
Debtor 1	Geri	Lynn	LaPorte		Case number (if known) 24-11996

Last Name

First Name

Middle Name

Pai	t 4: Answer These Questions for Administrative and Statistical Records		
	re you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to a Yes	the court with your other sched	lules.
5	 Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 Your debts are not primarily consumer debts. You have nothing to report on this part of the forthis form to the court with your other schedules. 	U.S.C. § 159.	t
	rom the Statement of Your Current Monthly Income: Copy your total current monthly income from 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.	n Official	\$3,882.92
9. c	opy the following special categories of claims from Part 4, line 6 of Schedule E/F:	Total claim	
	From Part 4 on Schedule E/F, copy the following:		
	9a. Domestic support obligations (Copy line 6a.)	\$0.00	
	9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	<u>\$533.00</u>	
	9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$0.00	
	9d. Student loans. (Copy line 6f.)	\$17,039.00	
	9e.Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$0.00	
	9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+ \$0.00	
	9g. Total . Add lines 9a through 9f.	\$17,572.00	

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Fill in this information	to identify your case:			
Debtor 1	Geri	Lynn	LaPorte	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bankr	uptcy Court for the:	Easte	rn District of Pennsylvani	<u>a</u>
Case number (if known)	24-11996	3		

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
Did you pay or agree to pay someone who is NOT an attorney to help	ρ you fill out bankruptcy forms?
✓No	
Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
Under penalty of perjury, I declare that I have read the summary and	schedules filed with this declaration and that they are true and correct.
X /s/ Geri Lynn LaPorte	
Geri Lynn LaPorte, Debtor 1	
Date 07/08/2024	
MM/ DD/ YYYY	

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Fill in this information	to identify your case:			
Debtor 1	Geri	Lynn	LaPorte	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bankr	uptcy Court for the:	Easte	ern District of Pennsylvania	<u>i </u>
Case number (if known)	24-11996			

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

04/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Give Details About Your Mari	tal Status and Where Yo	Du Liveu Beiore		
1. What is your current marital status?				
☐ Married				
✓ Not married				
2. During the last 3 years, have you lived an	nywhere other than where y	ou live now?		
☑ No				
Yes. List all of the places you lived in the	ne last 3 years. Do not includ	e where you live now.		
3. Within the last 8 years, did you ever live territories include Arizona, California, Idaho,				
☑ No				
☐ Yes. Make sure you fill out <i>Schedule H</i>	: Your Codebtors (Official Fo	rm 106H).		
Part 2: Explain the Sources of Your	Income			
4. Did you have any income from employm Fill in the total amount of income you receive If you are filing a joint case and you have income. No	ed from all jobs and all busine	esses, including part-time a	ctivities.	rears?
Yes. Fill in the details.				
✓ Yes. Fill in the details.	Debtor 1		Debtor 2	
Yes. Fill in the details.	Debtor 1 Sources of income	Gross Income	Debtor 2 Sources of income	Gross Income
Yes. Fill in the details.		Gross Income (before deductions and exclusions)		Gross Income (before deductions and exclusions)
Yes. Fill in the details. From January 1 of current year until the date you filed for bankruptcy:	Sources of income	(before deductions and	Sources of income	(before deductions and

	Case 24-119	96-amc	Doc 12 Filed 0 Documer	7/08/24 Entered on Page 33 of 42		Desc Main
ebtor 1	Geri	Lynn	LaPorte	o	Case number (if kno	wn) 24-11996
	First Name	Middle N	ame Last Name			
	calendar year: y 1 to December 31,	2023)	Wages, commissions, bonuses, tips	\$40,480.00	☐ Wages, commissions, bonuses, tips	
(Januar)	y 1 to December 51,	YYYY	Operating a business		Operating a business	
	calendar year before		✓ Wages, commissions, bonuses, tips	\$40,818.00	☐ Wages, commissions, bonuses, tips	
(Januar)	y 1 to December 31,	YYYY	Operating a business		Operating a business	
Include inc public ben filing a join No	come regardless of w efit payments; pension	hether that in ons; rental inc	ome; interest; dividends; m	of other income are alimony		urity, unemployment, and other nd lottery winnings. If you are
			Debtor 1		Debtor 2	
			Sources of income	Gross income from	Sources of income	Gross Income from
			Describe below.	each source (before deductions and exclusions)	Describe below.	each source (before deductions and exclusions)
	nuary 1 of current your tiled for bankruptcy					
For last	calendar year:		Pension	\$3,591.00		
(January	y 1 to December 31,	2023 YYYY				
For the	calendar year before	that:				
	y 1 to December 31,					
art 3: I	ist Certain Payme	ents You M	ade Before You Filed	for Bankruptcy		
_			orimarily consumer debts?			
☐ No.	an individual prima	rily for a pers	onal, family, or household p	bts. Consumer debts are de purpose." pay any creditor a total of \$7		as "incurred by
	No. Go to line 7	•				
	paid that	creditor. Do i		of \$7,575* or more in one of omestic support obligations, trupted case.		
			•	that for cases filed on or after	er the date of adjustment.	

	Case 24-119	996-amc D	oc 12 Filed Docume		Entered 07/08/2 34 of 42	4 13:13:13	Desc Main
Debtor 1	Geri	Lynn	LaPorte	3		e number (if knowr	n) 24-11996
	First Name	Middle Name	Last Name				
√ Yes.	Debtor 1 or Debto	or 2 or both have p	rimarily consumer d	ebts.			
_		-	-		r a total of \$600 or more	?	
	☑ No. Go to line	7.					
	Yes. List belo	ow each creditor to	whom you paid a tot	al of \$600 or more	e and the total amount y	ou paid that credi	tor. Do not
		payments for dome ney for this bankrup		ons, such as child	support and alimony. A	lso, do not include	e payments to
<i>Insiders</i> ind you are an	clude your relatives; officer, director, pe	; any general partne rson in control, or o	ers; relatives of any g wner of 20% or more	general partners; of their voting se		ou are a general pa ging agent, includi	artner; corporations of which ing one for a business you ony.
□No							
_	ist all payments to	an insider.					
			Dates of payment	Total amount pa	id Amount you still owe	Reason for th	nis payment
				# 700.00	* ***********************************	Money Loai	ned
Insider's N	arie Carter lame			\$700.00	\$2,300.00		
118 Co	ncord Dr						
Number	Street	_					
	rd, PA 18056-155						
City	State	e ZIP Code					
8. Within 1	year before you fil	ed for bankruptcy,	did you make any p	ayments or trans	fer any property on acc	count of a debt th	at benefited an insider?
Include pay	ments on debts gu						
☑ No							
Yes. L	ist all payments tha	at benefited an insid	ler.				
Part 4: Id	entify Legal Ac	tions, Reposses	sions, and Forec	losures			
	n matters, including				t action, or administrat lection suits, paternity a		custody modifications, and
✓iNo							
— Vos F	Fill in the details.						
103.1	iii iii tile details.						
	1 year before you f		, was any of your p	operty reposses	sed, foreclosed, garnis	hed, attached, se	ized, or levied?
√ No. G	o to line 11.						
☐ Yes. F	Fill in the information	n below.					
	90 days before you nake a payment be			including a bank	or financial institution,	set off any amou	ints from your accounts or
√ No							
☐ Yes. F	Fill in the details.						

	Case 24-11996	6-amc Doc	Document	08/24 Entered 07/ Page 35 of 42	/08/24 13:13:13	Desc Main
ebtor 1	Geri	Lynn	LaPorte		Case number (if know	n) 24-11996
	First Name	Middle Name	Last Name			
	1 year before you filed I receiver, a custodian,			y in the possession of an a	ssignee for the benefit o	of creditors, a court-
_						
Yes						
Part 5: L	ist Certain Gifts an	d Contributions	s			
13. Within	2 years before you file	d for bankruptcy, o	did you give any gifts v	vith a total value of more th	nan \$600 per person?	
√ No						
☐ Yes.	Fill in the details for eac	h gift.				
14. Within	2 years before you file	d for bankruptcy, o	did you give any gifts o	or contributions with a total	value of more than \$60	0 to any charity?
√ No						
☐ Yes.	Fill in the details for eac	h gift or contributio	n.			
Part 6: L	ist Certain Losses					
15. Within gambling?		for bankruptcy or	since you filed for bar	nkruptcy, did you lose anytl	hing because of theft, fi	e, other disaster, or
✓No						
☐ Yes.	Fill in the details.					
Part 7: L	ist Certain Paymen	ts or Transfers				
about see	king bankruptcy or pre	paring a bankrupt	cy petition?	acting on your behalf pay o		o anyone you consulted
□No						
√ Yes.	Fill in the details.					
		Descript	ion and value of any p	roperty transferred	Date payment or	Amount of payment
	Law, P.C.				transfer was made	
	Vho Was Paid	Attorney	r's Fee		06/10/2024	\$2,565.00
1500 V Number	Valnut Street Suite S Street	000				12,00000
City		Code				
	website address					
Person W	Who Made the Payment, if N	lot You				

Case 24-11996-amc Doc 12 Filed 07/08/24 Entered 07/08/24 13:13:13 Desc Main Page 36 of 42 Document Debtor 1 Geri Lynn LaPorte Case number (if known) 24-11996 First Name Middle Name Last Name 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. ☐ Yes. Fill in the details. 18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. **✓** No Yes. Fill in the details. 19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) **✓** No Yes. Fill in the details. List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. **√**No Yes. Fill in the details. 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? **✓** No Yes. Fill in the details. 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? **√**No Yes. Fill in the details. Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. **√**No Yes. Fill in the details.

Case 24-11996-amc Doc 12 Filed 07/08/24 Entered 07/08/24 13:13:13 Desc Main Document Page 37 of 42 Debtor 1 Geri Lynn LaPorte Case number (if known) 24-11996 First Name Middle Name Last Name Part 10: Give Details About Environmental Information For the purpose of Part 10, the following definitions apply: ■ Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? **√**No Yes. Fill in the details. 25. Have you notified any governmental unit of any release of hazardous material? **√**No Yes. Fill in the details. 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. **✓** No Yes. Fill in the details. Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP) A partner in a partnership An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation ☑ No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions,

✓ No

creditors, or other parties.

☐ Yes. Fill in the details below.

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LaPorte

ח	\sim l	^ +	^	r	1

Geri

Lynn

	First Name	Middle Name	Last Name
Part 12: Sig	gn Below		
and correct.	understand that ma	aking a false statemen	Affairs and any attachments, and I declare under penalty of perjury that the answers are true it, concealing property, or obtaining money or property by fraud in connection with a imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.
X /s/ G	eri Lynn LaPorte		
· —	ure of Geri Lynn LaP		_
Date <u>0</u>	07/08/2024	-	
Did you attac	th additional pages	to your Statement of F	Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?

√ No

Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☑ No

☐ Yes. Name of person ______

Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Case number (if known) 24-11996

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Fill in this information to identify your case:					
Debtor 1	Geri	Lynn	LaPorte		
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States Bankı	ruptcy Court for the:	Easte	rn District of Pennsylvar	<u>nia</u>	
Case number (if known)	24-11996	<u> </u>			

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information

below.

Identify the creditor and the property that is collateral What do you intend to do with the property that secures Did you claim the property as a debt? Did you claim the property as exempt on Schedule C?

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	will the lease be assumed? Will the lease be assumed? No Yes No Yes No Yes
sted in Schedule G: Executory Contracts and spired leases are leases that are still in effect not assume it. 11 U.S.C. § 365(p)(2).	Will the lease be assumed? Will the lease be assumed? No Yes No Yes No Yes
cpired leases are leases that are still in effect not assume it. 11 U.S.C. § 365(p)(2).	Will the lease be assumed? Will the lease be assumed? No Yes No Yes No Yes
	□ No □ Yes □ No □ No □ Yes □ No □ Yes
	☐ Yes ☐ No ☐ Yes ☐ No ☐ Yes ☐ No ☐ Yes ☐ No ☐ Yes
	□ No □ Yes □ No □ Yes □ No □ Yes □ No □ Yes
	☐ Yes ☐ No ☐ Yes ☐ No ☐ Yes ☐ No ☐ Yes
	□ No □ Yes □ No □ Yes
	☐ Yes ☐ No ☐ Yes
	□ No □ Yes
	☐ Yes
	☐ No
	☐ Yes
	□ No
	☐ Yes
	☐ No
	☐ Yes
	ted my intention about any property of my o

Date 07/08/2024

MM/ DD/ YYYY

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B2030 (Form 2030) (12/15)

United States Bankruptcy Court Eastern District of Pennsylvania

In re	L	aPorte, Geri Lynn	1				
					Case No.	24-11996	_
Debte	or				Chapter	7	
			DISCLOSURE OF COMP	ENSATION OF A	TTORNEY F	OR DEBTOR	
1.	com	pensation paid to	C. § 329(a) and Fed. Bankr. P. 20 me within one year before the fil behalf of the debtor(s) in contemp	ling of the petition in ba	ankruptcy, or a	greed to be paid to	me, for services rendered
	For	legal services, I h	ave agreed to accept			<u> </u>	\$2,565.00
	Prio	or to the filing of th	is statement I have received			<u> </u>	\$2,565.00
	Bala	ance Due				······	\$0.00
2.	The	source of the cor	mpensation paid to me was:				
	4	Debtor	Other (specify)				
3.	The	source of compe	nsation to be paid to me is:				
	1	Debtor	Other (specify)				
4.		I have not agreed firm.	d to share the above-disclosed co	ompensation with any	other person u	nless they are men	nbers and associates of my
	_	☐ I have agreed to share the above-disclosed compensation with a other person or persons who are not members or associates of management. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.					
5.	In re	eturn for the above	e-disclosed fee, I have agreed to	render legal service for	or all aspects o	of the bankruptcy ca	ase, including:
	a.	a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;					
	b.	Preparation and	filing of any petition, schedules,	statements of affairs a	and plan which	may be required;	
	C.	Representation	of the debtor at the meeting of cre	editors and confirmation	on hearing, and	d any adjourned he	arings thereof;
6.	Ву а	agreement with th	e debtor(s), the above-disclosed	fee does not include tl	he following se	ervices:	

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Filing fee plus Costs & Expenses. Motion to Extend the Stay. Continued Meeting of Creditor Hearings, Addition of Creditor after Filing Petition, Motions to Avoid Liens, Motions for Relief from the Automatic Stay, Motions to Dismiss Case, Adverserial Proceedings & Discharge Litigation, Depositions, Asset Cramdowns, Objection to Proof of Claims, Certification of Stipulation Defaults, Motions for Plan Modifications, Motions for Reconsideration, Vacate Wage Orders, Praceipe for Discharge, Bankruptcy Chapter Conversions, Redemption of Property, Lexis & Pacer Research, Credit, Property, Judgements, & Liens Reports. The above legal services will be billed at a hourly rate of \$375 per hour per attorney

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

07/08/2024 /s/ Michael A. Cibik

Date Michael A. Cibik
Signature of Attorney

Bar Number: 23110 Cibik Law, P.C. 1500 Walnut Street Suite 900 Philadelphia, PA 19102 Phone: (215) 735-1060

Cibik Law, P.C.

Name of law firm